What is claimed is

1. A method for treating or preventing conditions and diseases associated with IGT or IFG comprising administering a hypoglycemic agent or a pharmaceutically acceptable salt thereof to subjects in need thereof.

2. The method of claim 1 for the prevention or delay of progression to overt diabetes mellitus type 2; for the prevention, reduction or delay in onset of a condition selected from the group consisting of increased microvascular complications; increased cardiovascular morbidity; excess cerebrovascular diseases; increased cardiovascular mortality and sudden death; higher incidences and mortality rates of malignant neoplasms; and other metabolic disturbances that are associated with IGM.

3. The method of claim 1 for the prevention of cancer and reduction of cancer deaths.

4. The method of claim 1 for the prevention, reduction or delay in onset of a condition selected from the group e.g. consisting of retinopathy, other ophthalmic complications of diabetes, nephropathy, neuropathy, peripheral angiopathy, peripheral angiopathy or gangrene, myocardial infarctions, coronary heart disease, atherosclerosis, other acute and subacute forms of coronary ischemia, stroke, dyslipidemia, hyperuricemia, hypertension, angina pectoris, microangiopathic changes that result in amputation, cancer, cancer deaths, obesity, uricemia, insulin resistance, arterial occlusive disease, and atherosclerosis.

5. The method of claim 1 for the treatment of diseases and conditions associated with isolated prandial hyperglycemia and/or IFG including obesity, increased age, family history of diabetes, diabetes during pregnancy, dyslipidemia, high blood pressure, uricemia, insulin resistance, arterial occlusive disease, atherosclerosis, retinopathy, nephropathy, angina pectoris, myocardial infarction, and stroke.

6. The method of claim 1 for the prevention in subjects with prandial glucose excursions having 2 hour plasma glucose values between 7.8 to 11.1 mmol/L after an OGTT or casual glucose test.

7. The method of claim 1 wherein the hypogylcemic agent is (i) an insulin secretion enhancer selected from the group consisting of an appropriate phenylacetic acid derivative, gliquidone, an approriate biguanide, a sulfonylurea derivative, a DPP-IV inhibitor, GLP1 and a GLP1 agonist, or in each case, if appropriate, a pharmaceutically acceptable salt thereof; and (ii) an insulin sensitiser selected from the group consisting of a glitazone, such as pioglitazone, rosiglitazone and troglitazone or in each case, if appropriate, a pharmaceutically acceptable salt thereof.

8. The method of claim 7 wherein an insulin secretion enhancer is selected from the group consisting of a sulfonylurea, repaglinide, nateglinide, a DPP-IV inhibitor, GLP1 and a GLP1 agonist, or, in each case, a pharmaceutically acceptable salt thereof.

9. The method of claim 8 wherein the insulin secretion enhancer is nateglinide or a pharmaceutically acceptable salt thereof.

10. A pharmaceutical composition comprising a hypoglycemic agent or a pharmaceutically acceptable salt thereof and a pharmaceutically acceptable carrier.